

U.S. Department of Justice  
 United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Sam Clayton	COURT CASE NUMBER 2007 C-07-2781-CW
DEFENDANT Michael Chertoff, Secretary, U.S. Dept. of Homeland Security, et al	TYPE OF PROCESS ***see below
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONFISCATE U.S. Attorney's Office ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 450 Golden Gate Ave., P.O. Box 36055, San Francisco, CA 94102	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  Sam Clayton 1049 Market St., #203 San Francisco, CA 94103	Number of process to be served with this Form 285 4	Number of parties to be served in this case 6	Check for service on U.S.A. <input checked="" type="checkbox"/>
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SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

ENTERED

\*\*\*summons & complaint  
 docket #s 2-4

Fold

Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 510-637-3530	DATE 6/6/07
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## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 11	Signature of Authorized USMS Deputy or Clerk Hima	Date 6/19/07
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) ELSIE SATO / PARALEGAL	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 07/03/07 Time 11:45 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
Signature of U.S. Marshal or Deputy 	

Service Fee 45.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or (Amount of Refund*) \$0.00
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REMARKS: FWD TO S-F. Personal service on 6/20/07

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF  
Sam ClaytonCOURT CASE NUMBER  
C-07-2781-CW

DEFENDANT

Michael Chertoff, Secretary, U.S. Dept. of Homeland Security, et al

TYPE OF PROCESS  
\*\*\*see belowSERVE  
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONFISCATE

David Still, District Director, U.S. Citizenship and Immigration Services

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

630 Sansome St., San Francisco, CA 94111

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Sam Clayton  
1049 Market St., #203  
San Francisco, CA 94103Number of process to be  
served with this Form 285

4

Number of parties to be  
served in this case

6

Check for service  
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,  
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

ENTERED

\*\*\*summons & complaint  
docket #s 2-4

Signature of Attorney/Other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

510-637-3530

DATE

6/6/07

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total  
number of process indicated.  
(Sign only for USM 285 if more  
than one USM 285 is submitted)

Total Process

1

District of  
Origin

No. 11

District to  
Serve

No. 11

Signature of Authorized USMS Deputy or Clerk

Hima

Date

6/19/07

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described  
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

X RENE OLSON, LEGAL ASST.

☐ A person of suitable age and discretion  
then residing in defendant's usual place  
of abode

Address (complete only different than shown above)

Date  
07/03/07Time  
11:00  
☒ am  
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$45.00

Total Mileage Charges  
including endeavors

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal\* or  
(Amount of Refund\*)

\$0.00

REMARKS:

FWD TO S.F. ON 6/20/07 for personal service

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if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00

U.S. Department of Justice  
 United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

**FILED**  
 JUL 18 2007  
 RICHARD M. WIEKING  
 U.S. DISTRICT COURT  
 DISTRICT OF CALIFORNIA  
 OAKLAND

PLAINTIFF Sam Clayton	COURT CASE NUMBER C-07-2781-CW
DEFENDANT Michael Chertoff, Secretary, U.S. Dept. of Homeland Security, et al	TYPE OF PROCESS ***see below

**SERVE  
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONFISCATE  
 Eduardo Acuirre, Director U.S. Citizenship and Immigration Services  
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
 425 I Street, N.W., Washington, DC 20536

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Sam Clayton  
 1049 Market St., #203  
 San Francisco, CA 94103

Number of process to be served with this Form 285	4
Number of parties to be served in this case	6
Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

**ENTERED**

\*\*\*summons & complaint  
 docket #s 2-4

Signature of Attorney or other Originator requesting service on behalf of: <i>John P. Curran</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 510-637-3530	DATE 6/6/07
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I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 11	Signature of Authorized USMS Deputy or Clerk <i>Huma C...</i>	Date 6/21/07
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date <i>see below</i>
	Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy <i>Huma C...</i>

Service Fee \$8.00	Total Mileage Charges including endeavors -	Forwarding Fee -	Total Charges \$8.00	Advance Deposits 0	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: Mailed a copy by certified mail on: 6/22/07  
 received acknowledgment on 7/17/07

PRINT 5 COPIES:

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3. NOTICE OF SERVICE
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5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED